

King's College Hospital NHS Foundation Trust Board of Directors - PUBLIC

Minutes of the meeting of the Board of Directors held at 14:00 on Tuesday, 24 February 2015 in the Dulwich Room, Denmark Hill

Members:

Prof Sir George Alberti (GA)	Trust Chair
Chris Stooke (CS)	Non-Executive Director
Faith Boardman (FB)	Non-Executive Director
Ghulam Mufti (GM1)	Non-Executive Director
Sue Slipman (SS)	Non-Executive Director
Marc Meryon (MM1)	Non-Executive Director
Graham Meek (GM)	Non-Executive Director
Angela Huxham (AH)	Director of Workforce Development
Trudi Kemp (TK) – <i>Non-voting Director</i>	Director of Strategic Development
Dr. Michael Marrinan (MM)	Medical Director
Roland Sinker (RS)	Chief Operating Officer
Simon Taylor (ST)	Chief Financial Officer
Dr. Geraldine Walters (GW)	Director of Nursing & Midwifery
Jane Walters (JW) – <i>Non-voting Director</i>	Director of Corporate Affairs

In attendance:

Prof. Sir Robert Lechler (RL)	Executive Director – KHP
Ali Parvin (AP)	Charity Representative
Tooba Ahmadi (TA)	Corporate Governance Officer
Sally Lingard (SL)	Associate Director of Communications
Fiona Clark (FC)	Governor

Apologies:

Tim Smart (TS)	Chief Executive
----------------	-----------------

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/18	<u>Apologies</u> Apologies for absence were noted.	
15/19	<u>Declarations of Interest</u> There were no declarations of interest reported.	
15/20	<u>Chair's Action</u> There were no Chair's actions to report.	
15/21	<u>Minutes of Previous Meeting</u> The minutes of the meeting held on 27 January 2015 were approved.	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/22	<u>Matters Arising/Action Tracking</u>	
	There were no actions recorded on the action tracker.	
15/23	<u>King's Health Partners' (KHP)</u>	
	RL reported that KHP is focusing on some key areas to drive excellence nationally and internationally. To extract value from its partnership and create recognition internationally, KHP must focus on 7 institutes;	
	The following seven institutes are in different places in its developments and with different challenges but each institute has some real opportunities.	
	<ul style="list-style-type: none"> • The concept of developing a Haematology institute is a vision, that would be led by GM1; • The Cardiovascular Institute proposals are being led by Ajay Shah and clinical academic leaders from across the organisations. A hypothesis for a joint-venture model is under consideration where the institute would be co-owned by the partners; • The Child Health institute proposition now is to align around Evelina as the main tertiary hub, while recognising that child health services will also be provided on the King's site; • Dental Leaders are working on the visions to identify optimal configuration for the world's third most research active Dental Institute; • Diabetes and Obesity Institute is being led by a team of experts to identify the visions around diabetes research and an integrated community clinical service; • The Neuroscience institute is being led by Mark Richardson; and • Cancer institute developments are underway but there is scope for further consolidation. 	
	In discussion, the following points were raised and noted:	
	<ul style="list-style-type: none"> • There needs to be a rational distribution and configuration that maximises the clinical academic value of each of the three sites with sensible concentration of assets and least duplication; • There needs to be a compelling vision that adds value with a real belief that the institutes would lead to a significant increment in quality of outcomes in clinical, research and academic spheres through suitable vehicles where benefits and risks are shared; • KHP need to reach a fair settlement where each organisation can believe that there is a fair 'deal', hence the Trust Board would require the complete picture around cost, affordability and patient flow; 	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
-------------	----------------	---------------

- The Trust would develop a constructive proposal around the future vision of transplantation, regarding clinical excellence, quality and financial viability; and
- Initial discussions would take place on 3 March.

15/24 **Update from Board Committee Chairs**

Audit Committee

CS advised that the Audit Committee had not met since the last meeting of the Board.

Board Integration Committee (BIC)

CS reported that the Board Integration Committee met on 11 February 2015. It was agreed to discuss re-configuration of the Committee and review its terms of reference in order to have more frequent discussion on the recovery plans.

Education & Workforce Development Committee (EWDC)

AH advised that the EWDC had not met since the last meeting of the Board and the next meeting scheduled on 14 April 2015 has been cancelled due to the Care Quality Commission (CQC) visit.

Finance & Performance Committee

GM reported that the Committee met earlier today and received an update from PwC on finance and sustainability review. The three presentations from PwC provided the Committee with some assurance on the liquidity position, debtors as well as early gains on efficiency of the PRUH.

PwC continues to work with Trust across all its sites to implement their recommendations. The PwC engagement has been extended until end of April 2015. More details about the operational and financial performance of the Trust will be provided under agenda items 2.5 and 2.6.

Quality & Governance Committee (QGC)

GM1 reported that the QGC had an extended meeting on 11 February 2015 and it started with listening to a 'patient story'.

Amongst other reports the Committee received the 2014 National Accident & Emergency (A&E) department survey results. The Trust performed reasonably well against the 50 parameters with the Denmark Hill site outperforming the PRUH in all sections.

Good performance in 'patient falls' with fewer falls at both DH and PRUH sites compared to 2013 and against an increase in activity and patient acuity.

<u>Item</u>	<u>Subject</u>	<u>Action</u>
-------------	----------------	---------------

Overall, there has been good performance in patient experience with Orpington Hospital receiving 5 star rating on the NHS Choices website. The Committee also noted the mitigating actions against 'never events' that had taken place in the quarter.

Strategy Committee (SC)

SS advised that the Strategy Committee had not met since the last meeting of the Board.

15/25 **Update on Council of Governors' Activities**

The Board noted the following update on the Council's activities:

- A number of Governors participated in the recent (29 January) Governor Workshop, where a representative from Monitor talked about Governors' role and holding NEDs to account. SS gave a presentation on 'NHS pressures and the external environment' and Governors had an in depth discussion on Trust finances, performance management and the CQC inspection regime;
- Governor sub-committee meetings (Patient Experience & Safety, Membership and Community Engagement and Strategy Committees) were held on 05 February 2015. The elections for sub-committee Chairs are underway and the results will be announced on 10 March 2015;
- The first meeting of the new Nominations Committee was held on 23 February 2015;
- The governors met to discuss the Trust's finances and strategic planning at a Special Session held yesterday, 23 February 2015; and
- The next Joint KHP Governor Event will be hosted by Guys & St Thomas (GSTT) on Monday, 09 March 2015.

The Chair encouraged and emphasised the importance of more Governors attending and participating in as many Governor events as possible.

15/26 **Chief Executive's Report**

The Board noted the Chief Executive's report presented by RS on behalf of TS.

The following key points were noted:

- There have been numerous good performances around quality but 'never events' remain an area of concern;
- The Care Quality Commission (CQC) will undertake a formal inspection of the Trust's services and sites in the week commencing 13 April 2015;
- The Trust is continuing to work hard and has commissioned PwC to review the CIPs and help combat the current financial issues as well as the challenges facing the wider health economy;
- Despite the improvement in performance, the Trust is not achieving the performance targets that were agreed with commissioners;

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> • There has been good progress in tackling the admitted referral to treatment (RTT) backlog, especially at the PRUH. However, Emergency Department (ED) and Clostridium -difficile (C.Diff) performance remain a challenge at both DH and PRUH sites; • The preliminary results of the 2014 CQC National Staff survey results indicates that the Trust performed well in a number of areas but further analysis would need to be undertaken to address any area of concern; • Work continues with teams across King's Health Partners (KHP) to develop their vision for the future and scope how best to build on clinical and academic excellence; and • There has been significant improvement in availability of medical records at the PRUH following the implementation of weekly meetings and the tracking facility. The Trust will continue to review medical records action plan regularly at the Quality & Governance Committee. 	

15/27

Finance Report

The Board received the month 10 finance report presented by ST which was discussed at length at the Finance & Performance Committee, held earlier.

The following key points were noted:

- The Trust is reporting a year to date deficit position with a slight change to the underlying reason. Earlier in the year, the Trust was reporting significant levels of agency spend. This has been mitigated by improved recruitment and more permanent staff on the wards;
- Monies have been received from two Tranches. The primarily, Tranche 1 resilience activity is based on average tariff price. However, due to the level of complexity being significantly higher for the outstanding RTT activities compared to average tariff, the RTT backlog income has not covered the expenditure and has cost the Trust an additional £1.7m;
- The Tranche 2 resilience monies have been more case-mix related and based on tariff price plus a supplement to cover the independent sector off-site costs;
- Therefore, the significant cost pressure is impacting the Trust's overall financial position and the situation is worsened by additional fines from Commissioners for not meeting the waiting list target;
- The Trust has reached an agreement with NHS England (NHSE) regarding the level of over performance. This would improve the cash position and the Trust's ability to reduce the outstanding creditor balance and release some of the pressure;
- The challenge for next year is starting the financial year with a significant deficit position as well as the additional expectation for more efficiency and significant cost pressures;
- The Trust has commissioned PwC to support the Trust with a recovery plan and help reduce the deficit position;

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> • Monitor and NHSE have written to outline the proposed next steps for the 2015-16 national tariff; • The Trust would have to decide whether it opts for the enhanced tariff option or to stay with the roll over tariff by Wednesday, 04 March 2015; and • The Trust is in discussion with NHSE to increase the Trust's baseline contract. If the baseline cannot be increased then it is best to stay with option 1, roll over tariff. 	
15/28	<p data-bbox="269 583 553 615"><u>Performance Report</u></p> <p data-bbox="269 646 1341 716">The Board received the month 10 performance report presented by RS which was discussed at length at the Finance & Performance Committee held earlier.</p> <p data-bbox="269 747 1341 816">Overall there has been improved performance at both the DH and PRUH sites. The following key points were noted for other Trust sites and services:</p> <p data-bbox="269 848 407 879"><u>Orpington:</u></p> <ul style="list-style-type: none"> • Continued positive improvement in orthopaedic productivity with increase in number of patients and reduced Length of Stay (LoS); • Work is ongoing in relation to scheduling of patients and RTT performance; • Orpington, as a step down facility for Neuroscience is working effectively and further commissioning of Orpington also as a step down facility for acutely unwell patients from the PRUH is under consideration; and • The Trust is reviewing and resolving some managerial, nursing and medical leadership issues across all sites with the aim to identify the nominated nurse, doctor and manager for each ward. <p data-bbox="269 1310 607 1341"><u>Beckenham Beacon (BB):</u></p> <ul style="list-style-type: none"> • The transfer of neurology work from the PRUH to BB has been very effective, in particular around the PRUH cancer wait and in facilitating the transfer of some 'day surgery' activity; and • The Trust is trying to resolve some issues around water system and diagnostic capacity. <p data-bbox="269 1572 647 1604"><u>Queen Marys Sidcup (QMS):</u></p> <ul style="list-style-type: none"> • There is good preparation for the CQC inspection; • There has been improvement in nursing, ophthalmology and the environment; • Plans are underway to move Trust's services at QMS into a single block with much stronger identity and dedicated leadership. <p data-bbox="269 1835 423 1866"><u>Sevenoaks:</u></p> <ul style="list-style-type: none"> • There is still some improvement work to be done in relation to the issues of data migration from Oasis patient administration system to PiMs; and 	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
-------------	----------------	---------------

- Issues around outpatient clinics and medical records also need resolving.

15/29	<u>Quality & Safety Focus</u>	
-------	--	--

15/29.1	<u>Quarterly Patient Safety Report</u>	
---------	---	--

The Board noted and considered the quarterly patient safety report which was discussed in detail at the last Quality Governance Committee.

The following key issues and points were noted:

- The Trust made a submission of data on 13 February, which the CQC will use to inform their visit across all sites from 13 April 2015;
- A KPMG cross-site audit of Divisional quality and governance arrangements gave the Trust a rating of “significant assurance”. The audit report was approved by the Audit Committee in January 2015;
- The Duty of Candour came into force on 1st October 2014 and the Trust has put in place an action plan to ensure this is implemented across all sites. Over 700 staff have been trained and a report on compliance is being prepared ahead of the CQC Inspection;
- The rate of reported falls has fallen at both DH and PRUH. Falls with moderate harm or above reduced by 30% from 2013 to 2014 at DH. However this remains an area of concern at the PRUH and work is ongoing to address this issue;
- There have been 6 Never Events since September 2014 but none of these have resulted in significant harm;
- Measures have been put in place to roll out the surgical safety checklist (SSC) protocols across all sites and areas. An observational audit of the use and quality of SSC is planned to take place in Summer 2015;
- A number of actions have been put in place to address the concerns in Ophthalmology. This included a governance workshop for ophthalmologists across all sites and commissioning of Verita to conduct an external review of the service; and
- There has been a decrease in the number of grade 2,3 and 4 pressure ulcers in the last quarter at DH and the total number has almost halved at the PRUH with only one grade 3 and zero grade 4 pressure ulcers reported during this period.

The Board noted that there has now been evidence of significant improvement and engagement in the Ophthalmology department with clear lines of reporting and accountability. Additional governance measures would be put in place following the outcome of the Verita review.

It was also noted that the Trust is tracking and reviewing all its processes and areas of concern especially at the PRUH. Services or any hotspot areas of concerns would be moved to special measures, if necessary.

<u>Item</u>	<u>Subject</u>	<u>Action</u>
-------------	----------------	---------------

15/29.2 Quality Priorities

GW presented the review of the Trust performance against the 2014-15 quality priorities and the proposed quality priorities for 2015-16.

The following key points were noted:

- On the whole performance against 2014-15 priorities have been very good with the exception of ‘improving the experience of cancer patients’;
- Good progress has been made in the SSC priorities but the Trust would like to continue its focus in this key safety area, hence it is proposed that this is taken forward as a priority for 2015-16;
- This year, the Trust focussed work to improve co-ordination of discharge in a number of wards with various improvement initiatives. Given the complexity of discharge and multi-agency involvement, the Trust proposes to extend this quality priority for another year;
- The Trust achieved its quality priority target in ‘Patient Safety- Falls’ and given that a number of improvement initiatives are now in place to manage the number of patient falls, the Trust proposes not to take this forward as a quality priority for 2015-16;
- Following the stakeholder events and other engagement it is proposed the Board approves adopting the following quality priorities for 2015-16:
 - Patient Safety: Improving the surgical safety culture and Improving medication safety;
 - Patient Experience: Improving the coordination of discharge and Improving the experience of cancer patients;
 - Patient Outcomes: Maximising King’s contribution towards preventing disease e.g. smoking and alcohol and Improving the experience of patients with hip fracture.

The Board noted the 2014-15 performance, approved the 2015-16 quality priorities and the timeline for production of the quality report.

15/29.3 Annual Safeguarding Report - Children

GW presented the Safeguarding Children annual report and the key points included:

- The Trust has a dedicated Paediatric Emergency Department which sees approximately 30,000 children a year and all cases are reviewed in terms of safeguarding;
- Maternity care was provided for over 5,000 registerable births at DH and on average 15 babies per month were subject to formal child protection planning prior to birth;

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> • There has been an increase in the number of referrals to the safeguarding team at DH from 599 cases (2012-13) to 825 cases (2014-15) and circa 253 cases were referred at the PRUH site; • Additional staff and processes have been put in place to deal with the increased demand for safeguarding advice. There are named nurse and doctor at both DH and PRUH sites; • The Trust safeguarding children processes were audited by KPMG in December 2013, they gave an assessment of an 'adequate assurance' regarding the Trust's Safeguarding Children arrangements at the DH; • Numerous audit activities and internal management reviews identified that overall performance in safeguarding team is very good but training levels remain a concern; • The Trust is compliant in safeguarding training at level 1 (91.4%) and 3 (82%) at the DH, but the Trust has not achieved the 80% target for training at level 2 (71%) despite considerable effort to flag training to managers, provide face-to-face training and make e-learning available. • Training action plans have been developed to provide adequate training and identify training gaps across sites; and • At the PRUH mandatory training recording went over to the WIRED system and this has given a more accurate picture of the training need. 	

15/29.4 Bi-Annual Safeguarding Report – Adults

The Board received and noted the adult safeguarding report which details the Trust's performance over the past 6 months.

The following key points were raised and noted:

- As of Quarter 2, 2014 the Safeguarding Adults team took over the co-ordination of all deprivation of liberty (DoLS) safeguarding applications to enable more effective tracking of DoLS;
- There has been an increase in the number of DoLS applications since the Trust started collating the data. It is envisaged that the number of applications will continue to rise and efforts are being made to increase awareness and understanding;
- In October 2014 the updated training programme was introduced, which now includes 5 levels of training. Compliance on 31/01/2015 was 91.43% for Level 1 and 53.36% for Levels 2-5.
- Despite a significant amount of trainings (119 sessions to 2431 staff) delivered this year, the Trust still has issues attaining the required training compliance levels at 80%; and

<u>Item</u>	<u>Subject</u>	<u>Action</u>
	<ul style="list-style-type: none"> In order to address the compliance issue a targeted email will be sent to Managers listing their staff who are non-compliant. 	
15/29.5	<u>Monthly Nursing Staff Levels Report</u>	
	The Board noted and received the monthly nurse staffing levels and agreed that the nursing staff level data should be publicised in line with guidance.	
15/29.6	<u>National Patient Surveys - Accident & Emergency</u>	
	The Committee received and noted the national A&E survey results, which was published by the CQC on 02 December 2014 and discussed at the last Quality and Governance Committee. It was noted that this is the first combined survey reflecting both the DH and PRUH data.	
	It was highlighted that DH site has outperformed the PRUH in all sections and overall there has been some improvements in some areas in comparison to the previous survey results.	
15/30	<u>King's College Hospital Charity – Monthly Update</u>	
	The Board welcomed Ali Parvin (AP) to the meeting. AP provided a short update on the Charity's activities.	
	The following key points were noted:	
	<ul style="list-style-type: none"> The Charity's Showcase event will be taking place this evening, 24 February 2015; The event will feature various presentations showcasing the impact of charitable funds on improving patient care in the Trust through the provision of education and training, early development of pioneering research, improvements in facilities, and innovation in patient care; The event will also include an opportunity to hear about the changes impacting on NHS charities; The Charity Futures Steering Group chaired by FB, will have its first meeting on 26 February 2015 and will be seeking to make a joint recommendation to both Boards about the charity's future legal form by July 2015; In addition to mass small donations arising from fundraising activities across the Trust, the charity has received a significant donation of £125k from a grant making foundation to improve care for patients with heart disease at the PRUH; The Charity has made over 80 grants totalling £147,00 since the last Board meeting, which will be used in part for various ward refurbishments; and The Charity transferred £257k of helipad donations from local fundraising activities to the Trust. 	

<u>Item</u>	<u>Subject</u>	<u>Action</u>
15/31	<u>FOR INFORMATION</u>	
15/31.1	<u>Chair's and Non-Executive Directors' Activity Report</u>	
	The Board noted the Chair's and NEDs activity report for the period.	
15/31.2	<u>Confirmed Board Committee Minutes</u>	
	The Board noted the confirmed minutes of the Finance & Performance Committee (16/12/2014).	
15/32	<u>Any Other Business</u>	
	There were no matters of any other business raised for discussion.	
15/33	<u>Date of Next Meeting</u>	
	Tuesday, 31 March 2015, Trust Headquarters, PRUH Boardroom.	